

UCONN STREET HOCKEY ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

By signing this document, I assume all of the risks associated with participating in a street hockey tournament. I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form may be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action as follows:

I waive, release, and discharge from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, the event holders.

I indemnify, hold harmless, and promise not to sue the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that they are not responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test of a person's physical and mental limits and carries with it the potential for injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants, but are also present for volunteers.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

By signing this, I certify that I have paid or will pay before my participation the team fee of \$30. Approved payment methods include venmo to @dshane64 or anything else approved by the event holders.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Team Captain Name (Print): _____

Team Captain Signature: _____

Team Captain Emergency Contact Name: _____

Team Captain Emergency Contact Phone Number: _____

Team Member Name (Print): _____

Team Member Signature: _____

Team Member Emergency Contact Name: _____

Team Member Emergency Contact Phone Number: _____

Team Member Name (Print): _____

Team Member Signature: _____

Team Member Emergency Contact Name: _____

Team Member Emergency Contact Phone Number: _____

Team Member Name (Print): _____

Team Member Signature: _____

Team Member Emergency Contact Name: _____

Team Member Emergency Contact Phone Number: _____